| | | | | | | | | Application or Docket Number | | | | | |
|--|---|---------------------------------|---------------------------|------------------------|---------------------------|------------------|----------------|------------------------------|------------------|-----------------|-------------------------------|---|--|
| | PATENT AI | PPLICATION Effective | FEE DE e Octobe | TERM r 1, 20 | INATIO 00 | N RECOR | D. | | 1000 | 249 | 1.q = 1 | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY | | | OTHER THAN OR SMALL ENTITY | | |
| TOTAL CLAIMS | | | 2.5 | | | | RAT | E | FEE | | RATE | FEE | |
| FOR | | | NUMBER FILED NUMBER EXTRA | | | REXTRA | BASIC | FEE | 355.00 | OR | BASIC FEE | 7,10.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 25 minus 20= 51 | | | | X\$ |) = | | OR | X\$18= | 90 | |
| INDEPENDENT CLAIMS | | | 3 minus 3 = 6 | | | | X40 |)= 3. I | | OR | X80= | | |
| MUL | TIPLE DEPEND | DENT CLAIM PR | RESENT | | | | +13 | 5=\. | | OR | +270= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | ΤΟΊ | 4 Day 1 | | OR | TOTAL | 800 | | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | 15.75 7.17-25 | | OTHER | | |
| | | (Column 1) | | | mn 2) | Column 3) | CASMI Karat | | ADDI- | OR 1 | | ADDI- | |
| AMENDMENT A | | REMAINING AFTER | | NUN PREVI | IBER OUSLY FOR | PRESENT EXTRA | BA | TE | TIONAL FEE | | PATE | TIONAL* | |
| OME | Total 4 | AMENDMENT . 29 | Minus | a | 5 | =14 | X\$ | 9= | | OR | X\$18= | 200 | |
| MEN | Independent | . 5 | Minus | | 3 | *a | X4 | 0≐ | | T _{OR} | A4 | 168 | |
| ¥ | FIRST PRESE | NTATION OF MU | LTIPLE DE | PENDEN | T CLAIM. | | 413 | 5 _ | 属化的 | 1 Or | +270= | | |
| | | | | | | | | OTAL | | OR | TOTAL | | |
| | | | | Col | umn 2) | (Column 3) | ADDIT | FEE | | | ADDIT. FEE | W 120 120 120 120 120 120 120 120 120 120 | |
| 4 | | (Column 1) | 1,71,945 LASH2 | HIG | HEST MBER | PRESENT | | 9 (3 p.s.) 8 (4) | ADDI- | | | ADDI- | |
| AENT B | | REMAINING AFTER AMENDMENT | | PRE | /IOUSLY D FOR | EXTRA | R/ | TE | TIONAL FEE | | RATE | TIONAL FEE | |
| | Total | AMENDMENT | Minus | | 39 | | X\$ | 9= | | OF | X\$18= | | |
| AMENDM | Independent | . 5 | Minus | *** | 5 | | X | 10= | | OF | X80= | | |
| K | FIRST PRESE | NTATION OF M | JLTIPLE DE | PENDE | NT CLAIM | | 1 | 35= | | OF | +270= | | |
| | | | | | | | OTAL | | OF | TOTA | L | | |
| | | | | (0a) | l | (Column 3) | | T. FEE | | . Y | AUDIT: PE | | |
| | | (Column 1) CLAIMS | | HI | lumn 2) GHEST JMBER | PRESENT | 1 | • | ADDI- | | | ADDI | |
| | | REMAINING AFTER AMENDMENT | | PRE | VIOUSLY ID FOR | EXTRA | l R | ATE | TIONA FEE | | RATE | TIONA | |
| AMENDMENT C | Total | . 39 | Minus | *** | 39 | = 0 | X | 9= | | OI | X\$18= | | |
| MEN | Independent | . 2 | Minus | *** | 3 | -0 | | 40= | -0 e 3 | OI | X80= | | |
| E | FIRST PRES | ENTATION OF M | ULTIPLE DI | EPENDE | NT CLAIM | | ┛┡╌ | 35= | | o O | | | |
| 1. | If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | TOTAL | | oi Oi | тот | AL Jack of | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number for | | | | | | | | T. FEE | | | | ≡ E.L | |
| 1 | The "Highest Nu | ımber Previously P | aid For" (Total | or Indep | endent) is t | ie nignest numi | Jel Ioulia i | . u.o a | pp, opinate | | | | |